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ABSTRACT

This document synthesizes the critical issues discussed at a symposium designed to examine strategies that social institutions, particularly child care and early education institutions, can use to bolster parent and family effectiveness in providing healthy environments for children. First, the document describes four dimensions of parent choice: (1) enabling parent selection of appropriate services; (2) empowering parents; (3) improving quality; and (4) reforming the early care and education system. Next, the document assesses the present effectiveness of choice in each of the four areas identified as dimensions of parent choice. Finally, the document outlines specific strategies for addressing shortcomings in each of the four dimensions of parent choice. Contains 34 references. (MM)

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PARENT CHOICE IN EARLY CARE AND EDUCATION: MYTH OR REALITY?

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PARENT CHOICE IN EARLY CARE AND EDUCATION:

MYTH OR REALITY?

Sharon L. Kagan, Ed.D.*
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INTRODUCTION

Concern about the development and education of young children mounts as the nation faces crises in its child care, education, health, and human service systems. Exemplifying the depth and diversity of such ferment, concern is reflected in recurring debate around specific issues including school readiness and school choice, illegal nanny care, children's immunizations, and the quality of Head Start. As the nation "reinvents" its government and realigns its priorities, it is not surprising, then, that greater and more inventive thinking is being marshalled to address stark questions regarding the social obligations of society and families to young children.

To that end, in the early summer of 1992 the A. L. Mailman Family Foundation, in accord with its historic commitment to family support, hosted a symposium designed to examine strategies that social institutions--notably child care and early education--can use to bolster parent and family effectiveness in providing nurturing and healthy environments for children. Among many potential strategies, primary focus was given to parent choice as an approach that can empower parents to reach these goals. However, parent choice is a construct shrouded in controversy and laced with ambiguity in theory and practice. Dedicated to surfacing critical issues, to extracting salient lessons from practice, and to pushing current definitions and parameters of choice, the Mailman Symposium provided a forum for frank and robust discussion. Not a conference report or chronicle per se, this document attempts to synthesize the critical issues discussed, first by rethinking current conceptions and definitions of choice and their applicability to early care and education; second by assessing the present effectiveness of choice as a mechanism for both ensuring appropriate and high-quality services for young children and empowering parents; and third by outlining specific strategies--both choice-based and otherwise--for reforming the system and services of early care and education.

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DEFINITIONS OF CHOICE

In recent years, choice has drawn much attention from family service and education providers and reformers, and has been considered by some to be a panacea for current educational ills (e.g., Chubb & Moe, 1991). Moreover, 62% of the American public, according to the 23rd Annual Gallup Poll (Elam, Rose, & Gallup, 1991), support choice. It is not surprising, then, that choice proposals abound, with many states and school districts considering choice programs and choice-based reforms such as charter schools (Williams & Buechler, 1993). Choice is regarded by its advocates as the paramount tool for educational reform: it changes the client into a consumer and converts the dialogue from focusing on the supply side of education to the demand side. Not universally lauded, however, educational choice is regarded as both a revolutionary strategy and a huge equity risk, with the consequences for low-income families and for the nature of public education hotly contested.

While the choice debate in education circles runs rampant, some suggest that early care and education might provide a fertile theater in which to obtain a preview of educational choice in action (Holloway & Fuller, 1992). Sharing similarities in mission and strategy, public education and early care and education may, at first glance, seem to be appropriate analogues. Yet, as this analysis suggests, parent choice in early care and education may itself be more a myth than a reality.

Looking back on the history of early care and education--from its earliest days, to the parent cooperative movement, to the legislated commitment to empowerment in Head Start--the engagement of families has been regarded as fundamental to the definition of quality in early care and education. This is not to say, of course, that parents had choice across income levels, had equal access to services, or were equally empowered in the design and governance of such services. Indeed, in some cases the raison d'être for engaging parents was to "educate" them and reform their "less-than-ideal" parenting and nurturing skills (White & Buka, 1987). Despite these mixed intentions, such involvement does suggest, first, that the fundamental core of early education is imbued with a commitment to serving children and families and, second, that this commitment, however conceptually imperfect and functionally embryonic, has proved durable. The real question, however, is whether the commitments that fundamentally undergird early care and education constitute "choice" as it is currently being discussed.

How one defines choice is at the heart of the dilemma. Hofferth (1992) notes that the dialogue has evaded concrete definition. "Choice" in and of itself is an amorphous construct, able to be shaped and augmented in a variety of ways to serve a wide range of purposes. Some see it as a tool for increasing families' access to services, others as a market-based method of increasing the quality of service by forcing service providers to compete for clients. Some believe that its primary focus is to empower the disenfranchised, and others suggest that it is designed to benefit all families across economic classes. Reflecting such definitional and functional ambiguity, Nathan (1992) compares choice to electricity--a powerful force, with its effect depending entirely on how it is used. Such vacillations in intent and use have further complicated the controversy regarding the real utility of choice as an empowerment and/or reform strategy.

Dimensions of Choice

Even within the field of early care and education, often--and somewhat inaccurately--characterized as a choice-based system, no clear definition of the term "choice" exists. Rather, four implicit dimensions seem to characterize the nature of choice: (1) enabling parent selection of appropriate services, (2) empowering parents, (3) improving the quality of available services, and (4) reforming the early care and education system. Making these different dimensions--and their attendant strategies--explicit should advance some shared language and help bring some clarification to the choice dialogue.

Enabling Parent Selection of Appropriate Services

Experimentation in the 1970s and 1980s that focused on identifying a single, ideal educational model for all children revealed the futility of such a uniform approach (Clinchy, 1989; Holloway & Fuller, 1992; Nathan, 1992). Such strategies did not accommodate variations in children's learning styles, developmental rates, and cultural heritage and values, and in the practical needs of families. In order to respond to the variety of child and family needs, providing parents with a variety of options from which to choose is seen as increasing the likelihood that children are matched with services that are most appropriate for them. The first dimension of choice is thus predicated on the need for educational options to enhance child and family well-being.

Empowering Parents

Choice is often associated with empowering parents, in that by providing options it enables parents to exercise greater control over their environment (Stuart, 1992) while reinforcing parents' desires for cultural continuity and/or cultural diversity (Weissbourd & Massinga, 1992). Parent choice is also seen as a method of engaging parents and reinforcing their important role in their children's development; thus, in addition to empowering parents, choice has the latent advantage of engaging parents in the pedagogical process. Setting the precedent for involvement, choice is considered by some to be a necessary prerequisite to parents becoming full partners in their children's education system (Stoney, 1992).

Improving Quality

Because choice enables parents to select among options, its proponents argue that choice alone--irrespective of finances or regulations--can raise quality: it forces providers to compete for consumers who will be driven to select the highest quality, given options. Drawing comparisons with other consumer-driven markets and building on the national value attached to free-market enterprise, this approach suggests that such a system would create an environment of "survival of the fittest," in which high-quality providers would be rewarded with additional business and low-quality services that failed to meet the needs of families would lose their clientele and support.

Such assumptions are predicated on the availability of quality options (to stimulate competition), on consensual definitions of quality, and on the knowledge of consumers to identify what constitutes quality (Kagan, 1992). The lack of such consensual definitions of quality and of a sufficient knowledge base for parents can open the market to manipulation and collusion by service providers (Elmore, 1991), a condition that in the words of Hans Hansmann (1980) may be dubbed "market failure."

Reforming the Early Care and Education System

Beyond ginning up quality, choice has been touted as a mechanism for reforming systems, for making them more responsive to the real needs of diverse children and families. It has been contended that choice mechanisms will "open up" the system to new vendors and alter the supply of services. Advocates of choice as a means of system reform also contend that the early care and education system will function more efficiently, forced by market conditions to streamline services, eliminate duplications, and optimize resources.

Authentic versus Limited Choice

The degree to which the early care and education system currently meets these four dimensions of choice is a matter of considerable debate, dependent, in part, on how pervasive one feels choice must be. This analysis suggests that two constructs of choice are operative: authentic

choice and limited choice. Authentic choice assumes the following conditions: (1) that numerous options of varying types are readily accessible and viable; (2) that within the choice set are high-quality options that meet the particular needs and desires both of cultural groups and of individual families; and (3) that those who choose have clear ideas and solid knowledge about what constitutes quality.

In contrast, choice may be severely limited. Options may be limited in number or range, with cumbersome barriers (cost, transportation) preventing equitable access even to those options that do exist. Available choices may not be of high quality, and may not reflect the cultural and value preferences of parents. Rather than having a system based on authentic choice, we may have a system based on limited choice. Affirming this dichotomy, Bowman (1992) points out that such limitations result in decisions being based not on preferences but on complex tradeoffs, balancing the acceptable with the unacceptable. Authentic choice and limited choice, though often not distinguished in the nomenclature, are quite different. Bearing in mind this distinction, we turn to examine the degree to which choice is currently operative in early care and education.

THE CURRENT STATUS OF CHOICE IN EARLY CARE AND EDUCATION

To what degree is the attribution of "choice" to early care and education warranted, and to what degree is the current early care and education system realizing choice on the four dimensions posed above? Answers to these questions--the "myth or reality" of choice--bear potent implications for current operations in early care and education and for the application of choice-based reform to other education domains and to other fields of service.

Enabling Parent Selection of Appropriate Services

The effectiveness of choice on the first dimension--enabling parents to select appropriate services--can be assessed from two differing perspectives. Arguments that the first dimension of choice is fulfilled in the current early care and education system cite the wide variety of types of providers and services in operation (e.g., for-profit and nonprofit, center-based, family day care, church-sponsored, Head Start, public school programs, relative care, nursery schools). Providing further evidence of the existence of choice, studies indicate not only that parents generally consider a range of types and settings when choosing a care arrangement, but that parents are generally satisfied with the settings they have selected (Hofferth, Brayfield, Deich, & Holcomb, 1991; Holloway and Fuller, 1992). Hofferth (1992) notes, for example, that over 70% of families consider between 1 and 3 other options before selecting care. Moreover, they affirm the presence of choice in the selection of services by noting the availability of information on specific options via informal networks and word-of-mouth referrals from trusted friends and relatives (Kisker, Maynard, Gordon, & Strain, 1989). Based on this information and by exercising their ability to choose, it is argued, families are able to select services that meet their own often complicated logistical needs (proximity to home or work, hours of operation) and that reflect their particular child-rearing beliefs, cultural heritage, and values.

The counter-argument to this position does not contend that such choice is a myth for all parents, but that it is fully enjoyed by only a small subgroup of the population, notably those who have the resources to travel to and pay for services. It is interesting to note that while parents indicated they are generally satisfied with the care situation they have selected, Galinsky (1992) notes that for 75 percent of parents the selected "option" was the only one they considered acceptable: 53 percent would have made other choices if other acceptable options had been available, bespeaking a distinct perceived lack of choice. Although the exact percentage of parents who would choose a different care setting varies according to data source, the desire to change is fairly widespread (Fuqua & Labensohn, 1986; Hofferth, et al., 1991; Kisker, et al., 1989), calling into question the existence of authentic choice.

Further, the existence of authentic choice across the income spectrum is highly suspect. Differential family incomes limit choice options in any sector where universal entitlement (e.g., education) is not the norm. Functioning as a predominantly market-based economy with no universal entitlement, child care and early education fees and access vary greatly. Wealthy children are served in fee-for-service centers of typically high quality. Middle- and low-income children are often served in subsidized centers where quality varies, with some contracted centers offering high-quality services. Governmental attempts to redress quality inequities have had perhaps more success than attempts to redress access inequities. For example, governmental subsidies for care that have been targeted to the lowest economic bracket of the population have had limited choice provisions until recently; choice for low-income families is often the choice between one specific program or no support whatsoever. Finally, subsidies designed to increase families' ability to afford services may be hobbled by extensive procedural obligations placed on the parent that present a barrier to service access, as well as by delays in reimbursement that force families to pay for services up front with resources they may not have (Stoney, 1992).

Apart from socioeconomic issues, a family's choice of appropriate services can be limited by the age of the child to be served. Hofferth (1992) points out that services for infants are in short supply. Ironically, this may be due to the market-based nature of the system: such care is extremely expensive to provide, and the market is often unable to support high fees for providers, driving them out of the infant care business.

Posing an additional barrier, the exercise of choice is predicated on knowledge of available options. Unfortunately, the variety and fragmentation of service types and auspices in the early care and education field, though promoting diversity, does not include any sort of universal informational system that reaches out to parents and informs them of available options; consequently, an information gap exists concerning both the services that are available and funding assistance options to pay for services. In most cases, as noted above, parents rely on an informal network or "grapevine" of friends and relatives for information regarding their options. Though able to convey reports of personal impressions and experiences with different programs, this source of information may be flawed in that it is not comprehensive, may contain incorrect data that misleads parents, and may actually delimit parent choice. Further, relying on first-hand experiences of others is tempered by child-related variables--for example, a setting that is ideal for one child may frustrate the resiliency of another.

Another method of conveying systematic information are resource and referral organizations (R&Rs), which serve--among other things--as informational clearinghouses for parents. Though effective and growing, R&Rs are currently insufficient in scale to reach the full portion of parents who might elect to use them (Mitchell, Cooperstein, & Larner, 1992).

In addition to an incomplete awareness of choices, parents may differ from professionals in the value criteria they apply when making choices. Often perceived as the dilemma of parents "not knowing what constitutes quality," the real issue, discussed below, is that parents' perspectives of what constitutes quality may significantly vary from professional definitions of quality. It may not be that parents' knowledge base is inadequate, but simply that it differs from that of professionals.

In summary, then, fulfillment of the first dimension of choice--a method for acquiring appropriate early care and education services--is actually extremely limited, fully enjoyed by only a small portion of the population. Despite the existence of a market-based system and an apparently wide range of options, authentic choice on the first dimension is not a reality in early care and education.

Empowering Parents

Fulfillment of the second dimension--increasing parents' feelings of empowerment, self-efficacy, and involvement in their children's education through the exercise of choice--is brought into question by the limitations of authentic choice discussed above. Conditions that constrict one's choices or ability to identify, evaluate, and access those choices decrease the chances for empowerment. Stoney (1992) notes the importance of a system of authentic choice in effecting such empowerment, indicating that "not until parents truly believe that they have a choice, not until they have information on which they can act on the choice, not until they have an administrative system [and] a subsidy system that truly support choice, can they become real partners in the system." Though present for some, choice as an empowerment vehicle is absent for many families.

Because authentic choice is not ubiquitous, and because choice is not a functionally robust empowerment mechanism in the early care and education system, other empowerment mechanisms are used: legislative empowerment, personal empowerment, empowerment through education and training, and empowerment though economic self-sufficiency. The tradition of parent empowerment in Head Start provides an excellent example of such an alternative method (Greene, 1992; Holloway & Fuller, 1992; Powell, 1992; Zigler & Valentine, 1979). Though the program is the least market-based in the system (Holloway & Fuller, 1992), Head Start's structural features and its performance standards ensure parent empowerment and community involvement at levels unprecedented in the early care and education field. Thus, framing choice as an empowerment issue not bounded only by the selection process enables Head Start families to exercise choice at both policy and practice levels throughout their affiliation with the program.

An additional non-choice based alternative to parent empowerment can be found in the linkages being established between family support programs and early education. Burgeoning throughout the country, family support programs do not legislatively mandate roles for parents, but by focusing on prevention, by establishing non-hierarchical patterns of interaction among staff and parents, and by allowing flexibility in the programs, they render an important new model for parent empowerment (Kagan, Powell, Weissbourd, & Zigler, 1987; Orrego, 1992; Weissbourd & Kagan, 1989). Family support programs break the mold of isolation and dependence and enable families to take on new challenges.

Despite diverse, promising empowerment strategies (both choice-based and otherwise), natural tensions and subtle bias can delimit their potency. Tensions between providers (who are concerned with the well-being of all) and parents (who are concerned about their own well-being and that of their own children) characterize and complicate all human service delivery. Other forms of bias also impede empowerment; among the worst offenders, professional hegemony--that the provider knows best--disempowers parents and discourages their engagement in programs, even those explicitly designed to support their needs. Galinsky (1992), for example, notes that one in four child care teachers disapproves of mothers participating in the work force. Some feel working parents are negligent or uncaring regarding their children's upbringing, a belief that thwarts empowerment of parents. Though certainly not true for the entire field, biases regarding professional supremacy and parental ineptitude exist and create a barrier to the efficacy of various empowerment strategies.

Already burdened by subtle and overt biases against parents as a whole, subgroups of disadvantaged and minority parents may experience additional disenfranchisement and choice limitation. Victimized by stereotypes regarding both their effectiveness as parents and their abilities as citizens in comparison with mainstream groups, low-income parents are in double jeopardy; they lack real options and they are often encumbered by the false opinions and low expectations of others. As in society as a whole, some service providers retain pejorative stereotypes--such as equating poverty with laziness; low education level with an inability to understand issues involved in choice and child rearing; and limited English proficiency with an inability to think for oneself (Orrego, 1992). Such targeted stereotyping eventuates in the misperception that parents cannot make good choices. In

addition, over time and after repeated encounters with these prejudices and denials of opportunities to make their own decisions, disadvantaged and minority parents may themselves come to believe these biases, leading to what Orrego (1992) calls "internalized oppression." Such internalization, sapping self-confidence and the motivation to act independently, presents an additional, often deeply rooted barrier to empowerment and the exercise of choice (Lewis, 1992). In short, on the second dimension--choice as a method of parental empowerment--early care and education falls short. To the degree that empowerment does exist, it is usually manifest by careful attention to non-choice strategies.

Improving Quality

Though it forms the basis for arguments of many choice proponents in elementary and secondary education, the third dimension--that the competition for clients created by parent choice would drive up quality--there is little evidence for this effect in the current early education system. In part, the lack of such evidence is due to the absence of empirical work in this area. It is also due to the fact that quality in the early care and education system is highly dispersed, and where it exists seems to be more a function of non-choice variables including regulations, financing, and voluntary accreditation systems. For example, it is interesting to note that purported high quality exists in Head Start, characterized by extensive regulations and government involvement, despite the reality that parents have little choice in their selection of the program. Thus, the efficacy of choice as a means of quality enhancement in the early care and education field remains unclear.

Also unclear are the threshold standards by which quality is defined. Although the professional field has forged solid understandings of quality variables, and parents and teachers are in accord on some of them--the safety of the environment, a good relationship between parent and provider, and a warm and caring relationship between provider and child --important differences regarding the correlates of quality separate parents and professionals. Such differences are manifest as the criteria used when parents select early care and education programs, including ethnic culture, socio-economic status, personal past experience, and logistics (Powell, 1992).

Ethnicity and level of income are often associated with different conceptions of quality, and therefore with different preferences for early care and education. For example, subgroups vary in their attitudes toward discipline, teaching style (didactic versus exploratory), focus on individualism versus on the group, degree of ethnic segregation/integration, prior familiarity of family with provider, and degree of formal training of staff (Bowman, 1992; Galinsky, 1992; Powell, 1992). Parents also factor into early care and education choices their own experiences. Bowman (1992) notes, "all parents tend to make their decision based on their own experience, and we tend to value our own experience more highly perhaps than professional experiences."

Not directly related to the type of care provided, another element of importance to parents in selecting services is geographic proximity to home or work and hours of operation that are concordant with parents' schedules (Atkinson, 1987; Gravett, Rogers, & Thompson, 1987; Willer, et al., 1991). Cost of service is an additional issue of critical importance, especially for families with limited social and financial resources (Gravett, Rogers, & Thompson, 1987).

The viability of choice on this third dimension--as a vehicle to improve quality in early care and education--remains unclear. With the difficulties of quality enhancement being so pervasive, however, it seems highly unlikely that choice as a stand-alone strategy could ever create quality system-wide. More than on choice, quality is contingent on resources, regulations, and enforcement.

Reforming the Early Care and Education System

Finally, choice has been posited as a vehicle for systemic reform. Indeed, it does possess the potential for reform, but less clear is whether the reform will positively or negatively impact the early care and education field. Though somewhat premature and lacking empirical data, experiential information is available from the Child Care and Development Block Grant (CCDBG) experience. Implemented differently in each state, the CCDBG did expand the commitment to parental choice by encouraging expansion of vouchers and discouraging contracting mechanisms. To date, the voucher mechanism seems to be having mixed results. In some states, many new providers who had functioned outside the federal reimbursement system have begun to use vouchers. This is true among for-profit providers who would have otherwise been forced to abandon many of their inner-city centers. On the other hand, many centers that had relied on the contracting mechanism are being forced out of business due to vouchers, thereby delimiting choice options. Further, vouchers are being used in an array of centers where cost and quality are lower than contracted centers.

While choice in the form of vouchers has the potential to reform both the general education system and the early care and education system (Catterall, 1984), it is still empirically unclear how such change will become manifest. Skeptics warn that choice in early care and education may undermine quality and will certainly exacerbate rampant systemic inequities (especially given regulatory variability), weaknesses in enforcement, and inconsistency of inclusion. Advocates suggest that it will spur competition and engender tacit incentives for improvement. Whichever the case, choice as a reform mechanism seems to be more viable as a strategy for service acquisition--albeit for only some of the population--than it is a positive catalyst to empowerment, quality, or system reform.

IMPLICATIONS OF THE CURRENT STATUS OF CHOICE IN EARLY CARE AND EDUCATION

The above discussion reveals an early care and education system characterized primarily by limited rather than authentic choice, and by inequitable distribution of choice across groups. While choice seems attractive conceptually and may be a strategy worth pursuing in concert with other efforts, alone it is insufficient to meet any of the four dimensions. Parent choice often does not increase access to appropriate care for all, parents are often not empowered, quality does not increase by professional standards, and the system may be reformed but with some negative consequences.

In addition, this analysis suggests that choice alone must not be regarded as a panacea in early care and education. For parents and their children to be more involved and better served, an array of strategies must be implemented. Be it through linkages with family support or Head Start-like services, legislative alterations to regulations and quality standards, or the improvement of governance structures and professional training, alternative means to reform warrant consideration. Choice alone is an imperfect strategy.

STRATEGIES TOWARD ADDRESSING THE DIMENSIONS

Building on the findings regarding the shortcomings of the current choice system in early care and education and on the promise of alternative methods in achieving the four stated dimensions, various strategies are suggested.

Acquisition of Care

The strategies listed below amplify ways that acquisition of care could be expanded. While not the sole strategies, these options suggest ways of enhancing choice in the acquisition process that may be viable as long as equity for all families is ensured.

- Subsidization. Stoney (1992) notes that the supply of early education services in low-income communities is dependent not on demand but on the provision of subsidies. Two points must be underscored: subsidies need to be more widely available and they need to meet market rates. Increasing the range of choices for families, more vigorous subsidization on these two points is necessary in the current market-based system. Moreover, subsidization must be stable and free from burdening paperwork and procedural requirements. It must be linked to information services that increase awareness of subsidy programs and explain the benefits of higher quality services that such subsidies can purchase (Blau, 1992).

- Information Campaigns. Extensive information and awareness campaigns are advocated to increase parents' awareness of options that exist and to develop their understanding of and ability to evaluate their choices. Such a campaign, perhaps similar to that recently conducted on the dangers of smoking, should be for all parents, but should be targeted especially to low-income and low-education populations and delivered in parents' primary languages. This campaign should be multi-faceted (Salganik & Carver, 1991) and should provide information so that families can take advantage of available subsidies (Moore, 1992).

Parent Empowerment

As we have seen, parent empowerment has not been a by-product of choice to date. Using the strategies suggested below--in conjunction with other non-choice strategies--greater parent empowerment may be realized.

- Acquisition Strategies. Strategies described under the first dimension to increase the range and knowledge of choices and reduce inequity of access to service would provide the foundation for parent empowerment, creating opportunities for parents to make decisions and become involved in their children's education.

- Professional Training. Parents must be informed of the range and nature of their choices, but professionals also need to be informed of parents' desire and capacity for engagement. Providing a stronger focus on the benefit of parent involvement and empowerment, breaking down professional exclusivity and hegemony, and incorporating greater bias awareness and cultural sensitivity in professional training are imperative strategies. Further, increasing the numbers of minority leaders in the field could also help reduce cultural bias (Moore, 1992).

- Alternatives to Choice. As alternative methods toward empowerment, non-choice based strategies such as those used in Head Start should be increased. Rejecting the premise that choice is the sole facilitator to empowerment, alternative strategies focus on involving parents at multiple stages other than at the point of program selection, and have proven quite successful in fulfilling this dimension.

Quality Improvement

Among the most pressing issues in the field, quality improvement cannot be achieved via choice strategies alone. The following are several steps and issues that must be addressed in pursuing a quality agenda.

- Regulations. In order to ensure a choice of quality settings, standards and regulations must be instituted to establish a floor of acceptable quality (Galinsky, 1992). Such regulations, however, must fill two additional requirements. First, they must allow sufficient flexibility for program variation, avoiding any approach that imposes a single, standardized model. Second, they must be accompanied by appropriate and sufficient subsidization so that providers and parents are not forced out of the regulated market (Blau, 1992).

- Definitional Consensus with Flexibility. Though the creation of a single definition of quality acceptable to both parents and professionals might be somewhat complex, common perceptions of quality elements exist. These should be codified. Further, a dialogue between parents and professionals should be established to increase mutual understanding and appreciation of the other's values and criteria. A quality standard that does not violate empirical imperatives and that incorporates sufficient flexibility to accommodate parental and cultural variation should be constructed. Both parent information campaigns and parent-professional training programs are two promising routes for disseminating a consensual definition of quality.

- Reconciling Diversity with Standardization. Beyond the need to establish consensus on quality between parents and professionals, we need to grapple with the larger quality issue raised by the apparent contradiction between the movement toward developing universal standards of outcome accountability and the desire to provide real choice. If we accept the premise that "choice without diversity is no choice at all" (Kagan, 1992), then diversity of both program options and program goals is necessary. However, the current drive toward uniformity of goals and standardization of outcomes seems to contradict the need for the philosophic and pedagogical options that choice tacitly demands, pressing us to reach reconciliation between these two perspectives of diversity and standardized uniformity.

System Reform

Choice as a means to reform the entire early care and education system is only a limited strategy. The following suggestions should be considered in lieu of an isolated, choice-based approach.

- Understand Early Care and Education as a System. On the brink of a new approach to conceptualizing the delivery of services to young children and their families, the early care and education system needs to take stock of its conventional categorical approach to funding services. Rather than merely adding on more children or programs, the new paradigm demands that we do so with care and precision, recognizing that what happens in one sector of the field will influence other sectors and programs. Inventive approaches to decategorization, cross-program funding, and regulations should be systematically piloted and evaluated.

- Establish Unity Without Bureaucratization. Though long suffering from a lack of centralization, the field of early care and education in its drive to establish unity must learn from the lessons of elementary and secondary education; unity can breed stagnation and bureaucratization. Caution must be taken to "temper the drive for standardization and regulation" (Holloway & Fuller, 1992, p. 17) and maintain flexibility within programs, localities, and states.

- Provide Incentives for Collaboration and Empowerment. Presently there are few incentives in the entire system to foster collaboration and empowerment. Where collaboration occurs without specific attention to parent inclusion, parents are frequently disempowered because the sophistication and time demands of the collaboration discourage meaningful community engagement. Conversely, where empowerment programs are strong, there is usually some element of collaboration across systems.

- Understand Families as the Primary Constituency and Voice for Early Care and Education. From Head Start, we have learned powerful lessons about the importance of community-based engagement as a means of strengthening the program operationally and as means of sustaining the program politically. Head Start's successes need to be understood and applied to the early care and education system as a whole.

CONCLUSION

Through the window of choice, multiple dimensions of strengthening the early care and education system have been examined. To even the casual observer, it is apparent that choice alone has not imbued early care and education with the current vitality it now possesses. Choice may have been one factor in empowering some parents and in changing the system, but other strategies have been equally if not more potent. Choice as an operational construct does not yet appear to be the sole answer to reform for the early care and education system, much less for education in general. It does embody, however, some of the key principles that are essential to reform: (1) an informed constituency; (2) a series of options; (3) a commitment to family empowerment; (4) a vehicle for operationalizing the empowerment commitment; (5) operational flexibility; and (6) an inclusive definition of quality that accommodates inevitable adaptation.

Is the implementation of these principles beyond the reach of early care and education? Is it too big a stretch? Never in the history of American child care and early education has public will been so energized and has the field been more ready for action. Our challenge, in addition to clarifying conceptual ambiguities--in this case, surrounding the potency of choice as the anvil for reform--is to expand our strategic vision, recognizing that choice is not the answer, but that choice, as it is defined herein, may be one of a series of efforts that can evoke quality, equity, and other reforms so badly needed in the field today.

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The A. L. Mailman Family Foundation Symposium
June 29, 1992

THE SHIFTING CONTEXTS OF PARENT CHOICE IN EARLY CHILDHOOD EDUCATION

8:15	Registration and Coffee	
8:45	Welcome:	**Marilyn M. Segal,** Chair, A. L. Mailman Family Foundation
9:00	**Session I:**	**"Setting the Stage"**
	Moderator:	**James Levine**, Families and Work Institute
	Panel:	**Joe Nathan**, Hubert Humphrey Institute **David Blau**, University of North Carolina at Chapel Hill **Sandra Hofferth**, The Urban Institute
	Discussant:	**Sharon Lynn Kagan,** Yale Bush Center
10:30	**Session II:**	**"Voices from the Field"**
	Moderator:	**Rosalie Streett,** Parent Action
	Panel:	**Wanda Lewis**, Federation of Child Care Centers of Alabama **Maria Elena Orrego**, The Family Place **Lynn Stuart**, Cambridge Public Schools **Sarah Greene**, National Head Start Association
	Discussant:	**Louise Stoney**, Policy Consultant
12:15	Luncheon	
1:45	**Session III:**	**"Contexts of Diversity"**
	Moderator:	**Thomas Schultz**, National Association of State Boards of Education
	Panel:	**Barbara Bowman**, Erikson Institute **Douglas Powell**, Purdue University **Ellen Galinsky**, Families and Work Institute
	Discussant:	**Evelyn Moore**, National Black Child Development Institute
3:15	General Discussion	
3:45	**Session IV:**	**"Reflections and Challenges"** **Ruth Massinga,** Casey Family Program **Bernice Weissbourd**, Family Focus
4:30	Adjournment and Reception	

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